**Permit Fee: \$100.00 Filing Fee: \$ 50.00** 

For Office Use Only	
Check No.:	
Amount Rec'd:	

## **ONE DAY ENTERTAINMENT PERMIT APPLICATION**

	ıt
Event Location	Event Address
Event Information:	
Type of Event:	
Day of Event:	
Event Date:	
Raindate:	
Hours of Event:	
Total Attendance Expected:	
Description of Event:	
What type of Entertainment: (check below)	
1. <b>Dancing</b> □ By Entertainers or Performers □	No Dancing □
2. <b>Music:</b> Recorded □ Live □ Amplification	System
3. <b>Shows:</b> Theatre □ Floor Show □ Light Sh	now □ Comedian □
<b>Primary Contact Information:</b>	
First Name: Last N	ame:
Address:	
Telephone Number: Cell Pho	one:

## RETURN COMPLETED APPLICATION AND FEE(S) TO:

BOARD OF LICENSE COMMISSIONERS NEWTON CITY HALL 1000 COMMONWEALTH AVENUE NEWTON CENTRE, MA 02459